

ANALYST WORKSHEET

ACCESS PLANS

Carrier: _____

Date Submitted: _____

Additional Reports Received			
Form B	(Yes <input type="checkbox"/>)	(No <input type="checkbox"/>)	
GeoAccess	(Yes <input type="checkbox"/>)	(No <input type="checkbox"/>)	

GENERAL REVIEW REQUIREMENTS

TOPIC	REFERENCE	SPECIFIC ISSUES	Complies Y/N		
Timely Filing	WAC 284-43-210	Did the carrier file by January 31?			Contract Pg. _____ Comments: _____
Access Format	WAC 284-43-210	Did the carrier develop a separate and complete access plan for each health plan that has differing procedures and provisions?			Contract Pg. _____ Comments: _____
		1. Has the carrier answered the questions outlined in WAC 284-43-210? Answers must be numbered and in the same order. Also, the carrier cannot skip questions.			
		2. Has the carrier printed the subsection in its entirety then follow in a question and answer format?			
		3. Is the information pertinent to a subsection clearly documented within the plan?			
		a. Referring to outside publications or web-sites as a means of providing proof of compliance does not meet the minimum standard.			
Network Description	WAC 284-43-210 (1)	Has the carrier completed a table that summarizes its providers and facilities by type and county? The carrier cannot simply refer to its monthly filings.			Contract Pg. _____ Comments: _____
Referral Procedures	WAC 284-43-210 (2)	Carrier must inform the member of referral requirements to a specialist versus self-referring.			Contract Pg. _____ Comments: _____
		1. Does the carrier's response incorporate answers to the following questions:			
		a. What is required for a member to see a provider other than the designated PCP? If a prior authorization is required, how is it obtained?			
		b. Written approval?			
		c. Phoned in approval?			
		d. Carrier referral number?			
		e. When can a member self-refer?			
		f. Who authorizes a referral, if one is requested?			
		g. Under what circumstances would another entity authorize a referral?			

Network Adequacy	WAC 284-43-210 (3) WAC 284-43-200	<p>How does the carrier assure that it has an adequate network?</p> <p>Does the carrier report the processes it uses to:</p> <ol style="list-style-type: none"> 1. Determine how the carrier health network is meeting goals/thresholds for network adequacy? 2. Assess on an ongoing basis how those figures are revised to meet changes in demographic demand, and levels of satisfaction? 3. Which reports it used? <ol style="list-style-type: none"> a. HEDIS b. NCQA c. GeoAccess 4. Does the carrier explain what it does if the criteria are not met? 5. In the case of an insufficient network, does the carrier ensure access at no greater cost than if the service were obtained within the network? 			Contract Pg. _____ Comments:
Provides Services To Diverse Members	WAC 284-43-210 (4)	<p>Does the carrier describe how it will provide services to:</p> <ol style="list-style-type: none"> 1. Members with Limited English proficiency and literacy? Does the carrier use a language resource such as: <ol style="list-style-type: none"> a. AT&T Language Bank? b. Provide membership materials published in non-English languages? 2. Members with diverse cultural or ethnic backgrounds? 3. Members with Physical or mental disabilities, including but not limited to: <ol style="list-style-type: none"> a. Hearing? b. Sight? c. Physical disabilities? d. Mental disabilities? 			Contract Pg. _____ Comments:
Member Needs And Satisfaction	WAC 284-43-210 (5)	<p>Does the carrier describe:</p> <ol style="list-style-type: none"> 1. The method used to assess its member's healthcare needs, include the specific methods the carrier employs to maintain ongoing contact with participating providers regarding the healthcare needs of its members? 2. How does the carrier determine if members are satisfied with their healthcare services? <ol style="list-style-type: none"> a. HEDIS? b. NCQA surveys? c. Other surveys? 3. Is the data gathered within these surveys made available to members and providers? 4. Is the location of the data provided? (i.e. web-site, handbook, mailing, etc) 			Contract Pg. _____ Comments:

Description Of Covered Benefits; Access To Services	WAC 284-43-210 (6) RCW 48.43.510	How does the carrier describe its processes to inform members of: 1. The plan's services and features, including: 2. A description of covered benefits? 3. A listing of exclusions, reductions, and limitations to covered benefits? 4. Prescription drug benefits, a copy of the current formulary, and policies regarding coverage of drugs, such as how they become approved or taken off of the formulary? 5. How to obtain lists of participating primary care and specialty care providers?			Contract Pg. _____ Comments:
Grievance Procedures	RCW 48.43.530 WAC 284-43-615 WAC 284-43-210 (6)	Does the plan explain its grievance procedures, including: 1. The process members will need to follow in order to file complaints? 2. The procedures utilized to review and respond to complaints? 3. How carrier tracks and monitors each appeal until there is a final resolution? 4. How does carrier make available, copies of all grievance procedures for claims or service denials, and for dissatisfaction with care?			Contract Pg. _____ Comments:
Provider Selection	RCW 48.43.515 WAC 284-43-251 WAC 284-43-210 (6)	Has the carrier provided information on how to choose or change a provider? 1. Does the carrier inform the member that any PCP changes will take effect no later than the beginning of the month following the enrollee's request for change?			Contract Pg. _____ Comments:
Emergency Care	RCW 48.43.005 (11) RCW 48.43.093 WAC 284-43-130 (6) WAC 284-44-040 (5) WAC 284-43-210 (6)	How does the carrier explain how it approves emergency care including: 1. How does carrier inform members that a health plan shall not retrospectively deny coverage for emergency and non-emergency care that had prior authorization under the plan's written policies at the time the care was rendered? 2. Carrier policies covering services necessary to screen and stabilize a member if a prudent layperson believes a medical emergency exists? 3. Carrier policy definitions of what constitutes a medical necessity in an emergency situation? 4. Carrier policy in regards to a visit by a member to an emergency services center with a condition that does not meet the carrier's definition of a medical necessity?			Contract Pg. _____ Comments:
Specialty Care	WAC 284-43-210 (6)	Does the carrier inform the member how it approves specialty care?			Contract Pg. _____ Comments:
Prior Authorization	WAC 284-43-210 (6)	Does the carrier inform the member about procedures to obtain prior authorization for services, including: 1. Which procedures require prior approval? 2. Who authorizes the requests? 3. The process to obtain a standing referral for subscribers with complex, serious medical or psychiatric conditions?			Contract Pg. _____ Comments:

Reimbursement Procedures	WAC 284-43-210 (6)	Has the carrier provided details regarding its reimbursement procedures for the provider network, including:			Contract Pg. _____ Comments:
		1. Capitation provisions? a. What are the provisions and how does the carrier implement them?			
		2. Fee-for-service provisions? a. What are the provisions and how does the carrier implement them?			
		3. Healthcare delivery efficiency provisions? a. What are the provisions and how does the carrier implement them?			
Provider Compensation	WAC 284-43-210 (6)	4. Explain what is meant by "allowable amount". Cost-sharing, coinsurance, deductible, and copay?			Contract Pg. _____ Comments:
		Does the carrier explain how its provider compensation programs operate including:			
Specialty Care Coordination	RCW 48.43.515 WAC 284-43-210 (7)	1. Financial incentives?			Contract pg. _____ Comments:
		2. Penalty agreements with providers that are intended to encourage providers to withhold services minimize or avoid referrals to specialists?			
		How does the carrier describe how it ensures the coordination and continuity of care with Specialty providers, including:			
		1. The policies regarding the coordination of care requiring Case Management?			
Ancillary Services Coordination	WAC 284-43-210 (7)	2. Disease management, etc?			Contract Pg. _____ Comments:
		3. The procedures a member (with any life threatening, disabling, or other degenerative disease etc.) will need to follow in order to request that their care be coordinated through a specialty care center?			
		4. Does the carrier describe how the enrollee will have access to a specialist needed for a specific condition if a specialist is not represented on the specialty panel?			
		Does the carrier describe how it ensures the coordination and continuity of care with Ancillary services, including the coordination of efforts through providers such as:			
Community Resource Services Coordination	WAC 284-43-210 (7)	1. Home health care agencies?			Contract Pg. _____ Comments:
		2. Pharmacies?			
		3. Skilled nursing facility care?			
		4. Chemical dependency treatment centers, etc?			
Discharge Planning Coordination	WAC 284-43-210 (7)	How does the carrier ensure coordination and continuity of care with Social and community resource services, including the efforts to coordinate with community resource services such as:			Contract Pg. _____ Comments:
		1. Mental health facilities, etc?			
		2. County Health Department?			
Discharge Planning Coordination	WAC 284-43-210 (7)	3. Meals on wheels, etc?			Contract Pg. _____ Comments:
		How does the carrier ensure appropriate discharge planning, including:			
Discharge Planning Coordination	WAC 284-43-210 (7)	1. Any methods to assess member's conditions, specifically in relation to arranging appropriate care upon leaving a facility?			Contract Pg. _____ Comments:
		2. The criteria for determining how long a member may remain in a facility?			

Contract Termination	WAC 284-43-320(2)(7) WAC 284-43-210 (8) WAC 284-43-251 (5) WAC 284-43-200 (2) 45 CFR146.152 RCW 48.43.035 RCW 48.43.515	<p>Does the carrier provide in detail the proposed plan for continuation of care in the event of:</p> <ol style="list-style-type: none"> 1. Contract termination between the carrier and participating providers or facilities, including how the carrier will ensure service is maintained in a seamless transition between providers in the event of a contract termination with a member's provider, or? <ol style="list-style-type: none"> a. How does the carrier inform members that service of a provider whose contract is being terminated without cause will be covered for at least 60 days following notice of termination? b. How does the carrier ensure it is notified 90 days prior to contract termination by a facility, clinic or group of specialty providers? c. How does the carrier provide notification to its members 60 days prior to termination of a contract with a facility, clinic or group of specialty providers? 2. How does the carrier withdrawing an Individual product or products as stated by 45 CFR146.152: <ol style="list-style-type: none"> a. Provide 90 days notice to covered members if terminating a specific individual plan? b. Provide 180 days notice to covered members prior to terminating all individual health care plans? 3. Declaring carrier insolvency; or the carrier is unable to continue operations, include: <ol style="list-style-type: none"> a. All contract provisions between the carrier and participating providers ensuring that they will continue to provide services in the event of a cessation of operations? b. All carrier efforts to meet financial obligations to members and participating providers in the event of a cessation of operations? 4. Should any of these situations occur, how will members be Notified, including: <ol style="list-style-type: none"> a. How the carrier will inform members in the event of a contract termination with the members' provider? b. How the carrier will inform members in the event of a declaration of insolvency, or cessation of operations? 5. If the member is transferred to another provider, does the carrier explain: <ol style="list-style-type: none"> a. How the carrier will assist members to make the transition from one provider to another? 6. Does the carrier explain its efforts to minimize the adverse affects on its members in the event of a declaration of insolvency, or closing its office? 			Contract Pg. _____ Comments:

Public Goals Coordination	WAC 284-43-210 (9)	<p>Does the carrier explain how it:</p> <ol style="list-style-type: none"> 1. Identifies public health goals, including specific public health agencies or organizations the carrier coordinates with, and which of their health goals the carrier is attempting to meet? 2. Integrates these goals into the carrier's health plan services, include how the carrier communicates these goals to its participating providers? 3. Communicates with public health agencies (state, county and city, etc.), including how frequently the carrier communicates with these public health agencies? <p>If the carrier does not make any efforts to cooperate with public health agencies, or coordinate services with their goals then this must be clearly indicated.</p>			Contract Pg. _____ Comments:
Health Status Assessment	RCW 48.43.510 (5)(C) WAC 284-43-210 (10)	<p>Does the carrier describe how it assesses the health status of its members, including:</p> <ol style="list-style-type: none"> 1. How the carrier makes clinical protocols, medical management standards, and other review criteria available to participating providers? 2. How carrier communicates with participating providers regarding the ongoing health status of its members? 3. How the carrier maintains ongoing demographic surveys of its member's health status? 4. How does the carrier identify and manage the most prevalent diseases within its enrolled member population, including: <ol style="list-style-type: none"> a. Cancer? b. Heart disease? c. Stroke? d. Other illnesses identified by carrier? 			Contract Pg. _____ Comments:
Community Assessment Coordination	WAC 284-43-210 (10)	<p>How does the carrier incorporate public health agency community assessments, including:</p> <ol style="list-style-type: none"> 1. Whether carrier makes the findings of local public health agencies available to its participating providers and members? 2. Carrier's efforts to incorporate programs such as: <ol style="list-style-type: none"> a. EPSDT (Early & Periodic Screening Diagnosis and Treatment) etc? <p>If carrier does not make any efforts to cooperate with public health agencies, or their assessments, the carrier must clearly indicate this.</p>			Contract Pg. _____ Comments:
Confidentiality	45 CFR 160 – 164 RCW 48.43.505 WAC 284-43-820 (C) WAC 284-43-210 (11) WAC 284-04-510	<p>Does the carrier describe in detail its Privacy policies, including:</p> <ol style="list-style-type: none"> 1. The carrier's efforts to ensure that its member's personal and sensitive healthcare information is not improperly used or released? 2. The carrier rules regarding the disclosure of personal healthcare information? 3. Any entities that may be potentially allowed access to this information, and exactly under what circumstances this may take place? 			Contract Pg. _____ Comments:

Members' Health Records Access	45 CFR 160 – 164 WAC 284-43-210 (11) WAC 284-04-510	<p>How does the carrier communicate its Member's rights to restrict or obtain access to their own health information, including:</p> <ol style="list-style-type: none"> 1. Carrier policies for protecting the confidentiality of health information? 2. The efforts to assure a member's authorization of disclosure prior to the release of healthcare information? 3. The procedures a member will need to follow in order to access their healthcare information? 4. The procedures a member will need to follow in order to specifically restrict access to their healthcare information? 5. The healthcare information members will be able to obtain or restrict access to? 			Contract Pg. _____ Comments:
Data Integrity Procedures	RCW 70.02.110 WAC 284-43-210 (11) WAC 284-04-510	<ol style="list-style-type: none"> 1. How does the carrier communicate procedures regarding the restriction or access to a member's own health information, including: <ol style="list-style-type: none"> a. Who a member must contact in order to express their preferences regarding the use, content, collection or storage of their healthcare information? b. Carrier procedures permitting members to correct inaccurate, or incomplete information about themselves in healthcare records regarding them? 			Contract Pg. _____ Comments: